COMBINED DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR C-I-P)

| ` | CONTINUATION OR C-I-P) | | |
|---|-----------------------------------|--|--|
| As a below named inventor, I hereby declare that: | | | |
| | TYPE OF DECLARATION | | |
| This decla | aration is of the following type: | | |
| \boxtimes | original. | | |
| | design. | | |
| | supplemental. | | |
| | national stage of PCT. | | |
| | divisional. | | |
| | continuation. | | |
| | continuation-in-part (C-I-P). | | |
| INVENTORSHIP IDENTIFICATION | | | |

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

HEARING EVALUATION DEVICE WITH NOISE DETECTION AND EVALUATION CAPABILITY

SPECIFICATION IDENTIFICATION

| the specifi | cation of which: | | | |
|--|---|--|--|--|
| (a) 🔀 | is attached hereto. | | | |
| | Notice of July 13, 1995 (1177 O.G. 60). | | | |
| (b) | was filed on, as Serial No. or and was amended on (if icable). | | | |
| (c) | was described and claimed in PCT International Application No. , filed on and as amended under PCT Article 19 on (if any). | | | |
| AC | KNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR | | | |
| | reby state that I have reviewed and understand the contents of the above-identified ation, including the claims, as amended by any amendment referred to above. | | | |
| | knowledge the duty to disclose information, which is material to patentability as in 37, Code of Federal Regulations, § 1.56, | | | |
| \boxtimes | and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent, and | | | |
| | in compliance with this duty, there is attached an information disclosure statement, in accordance with 37 CFR 1.98. | | | |
| PRIORITY CLAIM (35 U.S.C. § 119(a)-(d)) | | | | |
| any fore applicate below as country | reby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of ign application(s) for patent or inventor's certificate or of any PCT international ion(s) designating at least one country other than the United States of America listed and have also identified below any foreign application(s) designating at least one other than the United States of America filed by me on the same subject matter having date before that of the application(s) of which priority is claimed. | | | |
| (d) 🛛 | no such applications have been filed. | | | |
| (e) <u></u> | such applications have been filed as follows. | | | |

PRIOR FOREIGN / PCT APPLICATION(S) FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. § 119(a)-(d)

| COUNTRY (OR INDICATE IF PCT) | APPLICATION NUMBER | DATE OF FILING (day, month, year) | PRIORITY CLAIMED UNDER 37 USC 119 | |
|------------------------------------|-----------------------|--------------------------------------|---|-------|
| | | | ☐ YES | □NO |
| | | | YES | □NO |
| | | | YES | □ NO |
| | | | ☐ YES | □NO |
| | | | YES | □ NO |
| CLAIM FOR | BENEFIT OF PRIOR U.S. | PROVISIONAL AP | PLICATIO | ON(S) |

(34 U.S.C. § 119 (e))

CH INC DATE

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

| PROVISIONAL AFFLICATION NUMBER | FILING DATE |
|---|------------------------|
| | |
| / | |
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| | |
| CLAIM FOR BENEFIT OF EARLIER US / PC | r addi ication(s) |
| UNDER 35 U.S.C. 120 | I AITLICATION(5) |
| | |
| The claim for the benefit of any such applications ar | |
| ADDED PAGES TO COMBINED DECLARATION | |
| ATTORNEY FOR DIVISIONAL, CONTINUATION PART (C-I-P) APPLICATION. | IN OR CONTINUATION-IN- |
| FART (C-1-F) AFF LICATION. | |
| ALL FOREIGN APPLICATION(S), IF ANY, FILED M | ORE THAN 12 MONTHS |
| (6 MONTHS FOR DESIGN) PRIOR TO THIS | |
| (| |
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| | |

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agents(s) to prosecute this application and transact all business in the Patent and Trademark office connected therewith.

Peter Bucci, Reg. No. 30,034

Robert M. Isackson, Reg. No. 31,110

Charles W. Bradley, Reg. No. 17,855

Robert A. Cote, Reg. No. 34,570

Bradford S. Breen, Reg. No. 30,823

Daniel P. Maguire Reg. No.

Lawrence B. Goodwin, Reg. No. 29,642

Patrick Hoeffner, Reg. No. 44,768

Attached, as part of this declaration and power of attorney, is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

DIRECT TELEPHONE CALLS TO:

(Name and telephone number)

Robert M. Isackson, Esq.

Robert M. Isackson, Esq.

ORRICK, HERRINGTON & SUTCLIFFE LLP 666 Fifth Avenue

New York, New York 10103-0001

(212) 506-5280

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

| Full name of sole or first inventor | | | | | | |
|--|---|-----------------------|--|--|--|--|
| Matthijs | P. | Smits | | | | |
| (GIVEN NAME) | (MIDDLE INITIAL OR NAME) | FAMILY (OR LAST NAME) | | | | |
| Inventor's signature | | | | | | |
| Date | Country of Citizenship | USA | | | | |
| Residence 1501 Industrial Road | | | | | | |
| Post Office Address | San Carols, CA 94070 | | | | | |
| | | | | | | |
| | | ia t | | | | |
| | | 1,7 | | | | |
| Full name of second j | oint inventor, if any | | | | | |
| Bryan | Р. | Flaherty | | | | |
| (GIVEN NAME) | (MIDDLE INITIAL OR NAME) | FAMILY (OR LAST NAME) | | | | |
| Inventor's signature | | | | | | |
| | | | | | | |
| Date | Country of Citizenship | USA | | | | |
| | Country of Citizenship | USA | | | | |
| Residence 1501 Inc | | USA | | | | |
| Residence 1501 Inc | lustrial Road | USA | | | | |
| Residence 1501 Inc | lustrial Road | USA | | | | |
| Residence 1501 Inc | lustrial Road | USA | | | | |
| Residence 1501 Inc | San Carols, CA 94070 | USA | | | | |
| Residence 1501 Inc. Post Office Address | San Carols, CA 94070 | USA | | | | |
| Residence 1501 Inc. Post Office Address | San Carols, CA 94070 | FAMILY (OR LAST NAME) | | | | |
| Residence 1501 Inc. Post Office Address Full name of third join | San Carols, CA 94070 nt inventor, if any | | | | | |
| Residence 1501 Inc. Post Office Address Full name of third join (GIVEN NAME) | nt inventor, if any (MIDDLE INITIAL OR NAME) | | | | | |
| Residence 1501 Inc Post Office Address Full name of third join (GIVEN NAME) Inventor's signature Date | nt inventor, if any (MIDDLE INITIAL OR NAME) Country of Citizenship | FAMILY (OR LAST NAME) | | | | |
| Residence 1501 Inc Post Office Address Full name of third join (GIVEN NAME) Inventor's signature Date | nt inventor, if any (MIDDLE INITIAL OR NAME) | FAMILY (OR LAST NAME) | | | | |

| Signature for fourth and subsequent joint inventors. |
|---|
| Number of pages added |
| * * * |
| Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added |
| * * * |
| Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added |
| * * * |
| Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal representative cannot be appointed in time. (37 CFR 1.47) |
| * * * |
| Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (C-I-P) application. |
| Number of pages |
| . * * * |
| Authorization of attorney(s) to accept and follow instructions from representative. |
| * * * |
| This declaration ends with this page |